



# ISSUES IN Child Abuse PREVENTION

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## Valuing Parent Education A Cornerstone of Child Abuse Prevention

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Most children are well cared for by their parents, although there are times in the lives of most parents when extra help and support is needed to assist them to care for their children. The provision of parent education in a variety of forms has become a cornerstone for supporting parents in general, and for working with 'at risk' and maltreating families to reduce the likelihood of child maltreatment. This paper provides an overview of parent education and the various forms it may take, in conjunction with a summary of what is known about the effectiveness of parent education interventions. Parent education is advocated as a significant component of any comprehensive framework for the prevention of child maltreatment.

Parenthood, described by one author as the 'last stand of the amateur' (Koller 1974, as cited in Warren 1983a), is the one occupation common to the majority of the adult population for which no training or educational qualification is required. The underlying societal assumption is that child-rearing skills and feeling protective towards children are natural and instinctive (Bowlby 1971, as cited in Corby 1993), requiring no additional instruction.

Clearly, most children are well cared for by their parents, although there are periods and occasions in the lives of most parents when extra help and support is needed to assist them to care for their children (Smith 1997). There are, however, some children for whom a parent's 'instinctive' desire to protect is unrealised, or for whom support is not forthcoming; these children become exposed to the risk of child maltreatment<sup>1</sup> (Tomison 1996c).

Over two decades ago, Mercer (1974) criticised western societies for venerating motherhood while generally abandoning 'inexperienced, isolated and weakened young mother(s)' to the

rigours of first parenthood. One strategy subsequently developed to assist parents to maintain an adequate standard of parenting has been to offer some form of education or training which can provide parents with information about the difficulties they will face as parents as well as the

skills they need to parent effectively and enhance their access to social supports (Reppucci, Britner & Woolard 1997).

The provision of parent education in a variety of forms has become a cornerstone for working with 'at risk' and maltreating families to reduce the likelihood of child abuse and neglect. Parent education is currently advocated as a significant component of any comprehensive set of preventative services for parents at high risk of abusing or neglecting their children (Dubowitz 1989; Chalk & King 1998). This paper provides an overview of parent education and the various forms it may take, in conjunction with a summary of what is known about the effectiveness of parent education interventions. Finally, the role of parent education is discussed within the context of its role in a holistic framework of prevention.

**The National Child Protection Clearing House serves as an interchange point for information, research and initiatives supporting work in the field of child abuse/neglect prevention.**

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## WHAT IS 'GOOD ENOUGH' PARENTING?

Parenting or child-rearing is 'a complex function involving relationships, communication, social skills, practical skills and the acquisition of understanding' (Smith 1997:4), typically defined in terms of a series of basic children's needs which parents attempt to satisfy. These needs include basic physical care, affection, security, the stimulation of a child's potential, guidance and control, responsibility and the development of independence (Cooper 1985).

Bavolek (1990, as cited in Smith 1997) developed a set of parenting 'building blocks' or skills that parents should acquire: bonding and attachment (establishing unconditional positive regard and an acceptance of the child); empathy; self-awareness; touch; discipline (setting clear limits for children); unconditional love, honesty and respect; and developmental knowledge (knowing what to expect of a child at the various stages of growth and development).

It is generally accepted that there is no such thing as the perfect parent, nor is there only one 'right' way to raise children. Given the need to recognise the differing goals and values of parents, the socio-cultural context within which families exist and the individual characteristics of children (Smith 1997), the phrase 'good enough' parents (Winnicott 1964) has become commonly used to describe the level of parenting to which most parents aspire. Typically, 'good enough' parents would achieve some competence in the parental building blocks defined by Bavolek (1990, as cited in Smith 1997). Although widely used, the term 'good enough' parenting has been criticised on the grounds that it sends the message that 'second-best' parenting is all that is required.

There have been many attempts to operationalise 'good enough' parenting for use in child welfare and child protection assessments and to provide a clear standard of acceptable child-rearing for parents. However, attempts to develop a universal set of explicit conditions or skills to define 'good enough' parenting have so far failed because of a lack of social consensus over what forms of parenting are dangerous or unacceptable (National Research Council 1993).

Wolfe (1993) gives one example of an attempt to provide a parenting standard, albeit in a broad-based way. He defines parents as 'socially competent' if they are able to display 'interpersonal strength', positively reinforce appropriate child behaviour and demonstrate affection. In addition, both Wolfe (1993) and Burgess (1985) define socially competent parents as those who are able to determine the appropriate parental response to a situation, based on careful observation of the situational demands. In contrast, 'socially incompetent' parents foster incompetence in their child via the failure to employ the behavioural responses crucial for competence. The child reacts negatively to the parent's behaviour, leading to the potential development of a cycle of poor parent-child interactions which may eventually lead to parent-child conflict and/or child maltreatment (Patterson 1977; Wolfe 1993).

Finally, it is worth noting that while many discussions of competence assume a broad classification of competence,

most empirical studies operationalise competence in terms of specific components of parenting and choose not to make a generalised judgement of competence (McMillan 1982). Such disparity further complicates what Tregeagle, Cox and Voigt note 'are serious conceptual difficulties in defining normal or average behaviour in everyday practice' (1997:8).

## THE MALTREATING PARENT

Social interactionist models of the causes of child maltreatment, such as Belsky's (1980) ecological model, emphasise the importance of viewing child abuse and neglect within the context of the child, the family, their local community and society (Belsky 1980; Wolfe 1994). Under such models, child maltreatment – physical and emotional abuse and neglect in particular – is perceived to be a symptom of significant child-rearing problems and the quality of parent-child relationships (Wolfe 1994). Less than adequate parenting and child-rearing are assumed to occur as a function of the inability of parents to manage child behaviour in an appropriate, non-violent manner (Kelly 1990).

In addition, child maltreatment often occurs in families with other significant family problems (for example, unemployment or substance abuse) (Browne 1988; National Research Council 1993). Parental frustration may be exacerbated in such 'at risk' families because of a lack of parenting skills or social supports. The inability to cope adequately with the family's problems may result in episodes of harsh discipline or child abuse (Reppucci, Britner & Woolard 1997).

Investigations of the characteristics of abusive parents have provided evidence for parental deficits in child management skills (Burgess, 1979), emotional overreactivity to aversive child behaviour (Wolfe et al. 1983), greater misattributions and misperceptions of child behaviour (Mash, Johnston & Kovitz 1983; Belsky & Vondra 1989; Altepeter & Walker 1992), higher behavioural impulsiveness (Rohrbeck & Twentymann 1986), and deficient social problem solving skills (Azar et al. 1984; Pransky 1991; Williamson, Borduin & Howe 1991).

Abusive parents are also more likely to hold positive attitudes towards the use of physical punishment as a form of disciplining children (Kelly 1990; Pransky 1991; Williamson, Borduin & Howe 1991). Ineffective child control strategies and high rates of corporal punishment may be maintained because of their ability to temporarily suppress children's misbehaviour (Kelly 1990). However, more severe punishment may be required to produce the same degree of child compliance over time. An overreliance on physical punishment may eventually result in punishment at levels considered to be abusive, or where a child is physically injured (Kelly 1990).

Such strategies are also likely to increase child aversive behaviour, which in turn increases the intensity and frequency of aversive parent-child interchanges, and which may result in the establishment of an ongoing 'coercive cycle' (Patterson 1977). Observational studies have supported this formulation. Abusive parents produce fewer positive

parental behaviours, more negative and/or aversive behaviours and lower levels of attentiveness to the child than parents in a matched control study, even during routine parent-child interactions (Burgess 1979; Bousha & Twentyman 1984).

Overall, it appears that the probability of 'less than adequate' parenting or child maltreatment is heightened if parents lack the necessary child-rearing skills, knowledge of child development and/or the social support that would enable them to parent in an appropriate manner (Kelly 1990; National Research Council 1993; Chalk & King 1998). Such findings have led to parent education being advocated as a significant component of any comprehensive set of preventative services for parents at high risk of abusing or neglecting their children (Dubowitz 1989; Chalk & King 1998).

## PARENT EDUCATION

Parent education can be defined as 'a systematic and conceptually based program intended to impart information, awareness and skills to the participants on aspects of parenting' (Fine 1980:5). The underlying tenet of parent education is that 'a parent who is well-prepared for the life changes associated with childrearing is less likely to succumb to the increasing stress factors that prevail. This viewpoint supports the principles of preventative mental health – [that] skills, knowledge, and experiences that boost the individual's coping abilities...will increase their resistance to the forces that oppose their healthy adjustment.' (Wolfe 1993:98)

Such programs are not new (for example Brim 1965, as cited in McMillan 1982), although the features and emphases of such programs have changed. The evolution in parent education has been perceived to be a 'major milestone in the long and rich history of efforts to influence parents' knowledge and skills' (Powell 1997:9).

Programs may take a number of forms and can be employed at the community level, with 'at risk' families, or to prevent the recurrence of maltreatment in abusing families.

Parent education is generally assumed to benefit families in two ways: by increasing parents' knowledge of child development and appropriate methods of child-rearing, problem solving and home management; and by reducing parental stress via the expansion of the social support networks available to parents (DePanfilis 1996; Reppucci, Britner & Woolard 1997).

### Parent Education in Australia

It was not until the late 1980s that parent education began to gain strong acceptance among policy-makers and service providers in Australia as a tool to prevent child maltreatment. Two surveys of parent education programs completed at that time in Victoria (John 1989 and Rodd & Holland 1989, both cited in O'Brien 1991) concluded that parent education appeared to be targeted at well-educated parents, with few programs available for parents considered to be 'at risk' of maltreating their children. Less educated parents appeared to attach a stigma to parent education and were thus less likely to seek out parent education resources (John 1989, as cited in

O'Brien 1991). There also appeared to be less access to parent education for migrant, rural and adolescent parent families.

Since then Australia has adopted parent education and other forms of prevention programs with alacrity. Initially, overseas programs were utilised without taking into account the needs of Australian communities (James 1994). More recently a strong trend to adapting and modifying programs has been apparent, in conjunction with the development of new Australian programs (Tomison 1997b).

### Parenting and Stress Management

As mentioned above, one of the contributions made by the ecological frameworks used by social interactionist models to determine the causes of child maltreatment is their emphasis on the effect of the wider social environment on families. Such models articulate the hypothesis that abusive behaviour may occur as a function of 'stress-promoting forces' from within the family and the wider social system (Altepeter & Walker 1992; Reppucci, Britner & Woolard 1997). That is, the stress resulting from situational demands may lead 'at risk' parents to become abusive in the absence of ameliorating factors such as adequate social support.

Parent education, in the form of family support, is one method used to reduce situational stress by training and educating 'at risk' parents on alternative behavioural management techniques and personal coping skills (Altepeter & Walker 1992). These skills can enable parents to minimise stress or adaptively cope with the stress they experience (Altepeter & Walker 1992). Parents are educated to 'systematically and consistently implement various techniques which are based on respondent and operant learning principles in managing their children's behavior' (Altepeter & Walker 1992:227). The intention is to provide parents with effective child-rearing and disciplining techniques which are presumed to be more effective than those they employed prior to training.

Parents are encouraged to utilise their skills to manage their children's behaviour more effectively, thus minimising or preventing subsequent behavioural problems (Altepeter & Walker 1992). Other benefits of such an approach have been an increased sense of parental competence (Blechman 1984, as cited in Altepeter & Walker 1992), while the increased use of positive reinforcement of children's behaviour by parents leads to a greater number of positive parent-child interactions in the parent-child relationship (Eyberg & Robinson 1982).

However, determining the effectiveness of such parent-training programs, like much of the child abuse prevention field, has been hampered by the limited quality of much of the evaluative research which has been produced (Altepeter & Walker 1992; Chalk & King 1998). (See 'Evaluations' for a detailed discussion.)

### Generic Versus Targeted Programs

A relatively recent development in parent education is to extend the parent-training courses beyond those interventions that only target specific behavioural problems to programs that aim to equip parents with a set of 'effective



behavior management skills' (Altepeter & Walker 1992). Some 'at risk' or maltreating parents appear to have generalised parenting skills deficits (Burgess 1979), while others may have specific or idiosyncratic child-problem situations which may carry a high probability of producing an inappropriate parent response and/or physical abuse (Kelly 1990).

Evidence suggests that parent education and training may produce the greatest impact when targeting 'specific conflict areas, child problems, and parent skill deficits known to affect the family being treated' (Kelly 1990:281). However, if the focus is too narrow, parents may be left with solutions for specific problems but without the ability to integrate the principles and underlying skills needed to deal with other parenting problems (Kelly 1990).

Generic skills courses, where training is not focused on direct application of the skills, can provide parents with a set of basic skills which can be applied in a number of ways (Altepeter & Walker 1992). An example is the program Effective Parenting for 5 – 12 Year Olds, an eight-week program run by the Engadine Community Health Centre in New South Wales. Based on the US Systematic Training for Effective Parenting (STEP) program (Dinkmeyer & McKay 1976), the program covers understanding children's behaviour; understanding the influence of family of origin on parenting styles, values and family atmosphere; encouragement and self-esteem; communication and listening skills; management using natural and logical consequences; and looking after couple relationships. The program is aimed at average families who present with common behavioural problems rather than maltreating families.

This is an important point. Proactive programs are targeted at parents who have not already developed severe parenting problems or become abusive or severely neglectful. A short-term course, in isolation, is unlikely to be able to remedy the problems of families facing serious parenting or other situational stresses (Chalk & King 1998). As O'Brien notes, 'teaching parenting skills...on its own does not prevent child abuse. All of the child management techniques and communication skills acquired will vanish in the critical incident where a child unleashes the hurt from the past in the parent and the parent retaliates' (1991:20).

Overall, the impact of such proactive, educative programs is not clear, particularly with regard to determining the long-term effects on parent-child relationships (Altepeter & Walker 1992; Chalk & King 1998). A related issue worthy of further attention is to determine the reasons for parents failing to complete the programs and to investigate the impact of programs on those who drop out or who fail to complete them.

## CLASSIFYING PARENTING PROGRAMS

Reppucci, Britner & Woolard (1997) describe family support programs, and parent education initiatives in particular, as unique in terms of the diversity of programs and interventions that they encapsulate. As a consequence, a large variety of classifications have been proposed as a means of structuring parent education programs to clarify their

purpose or assess their efficacy. For example, some classifications distinguish between parent competency programs which provide an overview of the tenets of good parenting in courses of limited duration, in-depth programs targeted at 'at risk' groups, and parent-child support programs (Werkele & Wolfe 1993).

In their assessment of family violence prevention and treatment programs, the US National Committee on the Assessment of Family Violence Interventions differentiated between programs that incorporated home visiting services, which were reported as only being offered to families at risk of maltreatment but who had not been reported for it (Chalk & King 1998), and Intensive Family Preservation services, which are traditionally short-term, crisis-oriented services aimed at families identified as abusive.

The aim of these courses is to prevent the need for the child to be removed from the family and placed in care as a consequence of child maltreatment. The intention is to keep the family unit intact where possible via the provision of therapeutic and practical support; such programs usually have a home-visiting component (Chalk & King 1998). Although the principles and practices of Intensive Family Preservation services have been adapted for use in some Australian agencies, the distinction between home visiting and family preservation projects is not made.

Parent education, like child abuse prevention in general, is commonly classified, using a 'public health' model, into three main levels: primary, secondary and tertiary prevention (Helfer 1982). Although this prevention classification system has been widely adopted, it has its limitations. First, many prevention programs cannot be neatly classified into the primary, secondary and tertiary categories (Calvert 1993; Tomison 1995b; Tomison 1997b). Second, although the system may be useful for the purposes of research and government departmental administration, many practitioners feel the system creates artificial distinctions between types of prevention programs, and between 'at risk' and abusive or neglectful families (Tomison 1995b). With regard to the latter, there is some evidence to suggest that, in Australia, any distinction between 'at risk' and maltreating prevention initiatives is an arbitrary one – a contention discussed below.

### Primary Prevention

The aim of primary prevention programs is to stop abuse before it starts by targeting the community as a whole via universal health and welfare programs (Calvert 1993). Parent education at the primary level generally comprises mass media campaigns, generic parent skills programs of limited duration or universal home-visiting services.

#### *Community education*

Research has suggested that the Australian community is broadly aware of child maltreatment (Donovan Research 1992). However, the public perception of child maltreatment appears primarily to be associated with severe physical abuse or sexual abuse (Donovan Research 1992), due mainly to media coverage of various court cases and associated feature articles (Wilczynski & Sinclair 1996).

It has been contended that Australian community education campaigns need to follow the trend set by the United States in retargeting programs to provide the public with detailed knowledge of specific aspects of child abuse and neglect (Tomison & McGurk 1996) and, in particular, promote appropriate parenting behaviours and positive parenting skills (Lovell 1997; Tomison 1997a).

*Think About the Little Things You Do – A ‘Positive Parenting’ Campaign (Lovell, 1997)*

In response to the increased number of child abuse notifications to the Queensland Department of Families, Youth and Community Care, the Queensland Centre for the Prevention of Child Abuse (QCPCA) recently launched a Child Abuse Prevention Community Awareness Campaign. The campaign is based on the assumption that it is the ‘little things’ that parents do, both positive and negative, that have a profound and lasting impact on children, and it is here that extreme forms of child abuse, in the cumulative effects of everyday behaviours and attitudes, have their origin (Lovell 1997).

The intention is to reach every parent in Queensland with the message that parents can, with appropriate support, think about the ‘little things’ they do; to provide practical resources for positive parenting; and to promote the resources through community-based and educational organisations and directly to the parenting public. Designed as a direct response campaign, it encourages parents, community agencies and educators to seek further information on aspects of parenting.

To this end, a series of booklets based on a successful parenting resources kit developed in South Australia have been produced. Topics range from practical information on toilet-training to dealing with issues of teenage peer pressure and talking to teenagers about drugs. Additional materials include two display posters with the message ‘little things you can do as a parent’ and ‘little things can mean a lot to a child’, and flyers for distribution to the public. The flyers include a direct response coupon and 1800 freecall contact details.

*Like Engraving in Stone*

The NSW Child Protection Council has funded a number of prevention initiatives under the Child Abuse Prevention Resource Grants Program, including the ‘Like Engraving in Stone’ resource kit. This incorporates a series of audiotapes for radio broadcast recorded in Arabic and a 25-minute video (in English) developed by the Australian–Arabic Welfare Council for use in the Arabic community. One of the aims of the kit is to make parents of Arabic backgrounds more aware of parenting issues, child development, abuse issues and alternative methods of upbringing. The audiotapes use children’s voices and layperson opinions, as well as medical and legal advice, and are available for loan by interested families.

*Parenting education*

One promising primary preventative approach is to ‘enhance competencies, personal resources and coping skills in parents that contribute to the development of positive parent–child relationships and prevent the onset of dysfunctional interactions’ (Rosenberg & Reppucci 1985:577–8)

via universal parenting skills courses of short duration. Put simply, the approach is to provide the wider community with access to universal parenting programs in order to provide basic instruction in parenting skills.

*Triple P program*

The Positive Parenting (Triple P) Program developed by Associate Professor Matt Sanders at the University of Queensland is a parenting education program where, as the title suggests, the focus is on the enhancement of good parenting rather than the minimisation of bad parenting.

The purpose of the program is to provide a positive parenting program model for parenting and family support at the primary and secondary levels. The program focuses on the following areas: parents interested in information about promoting their child’s development; parents with specific concerns about the child’s behaviour or development presenting to primary care practitioners; parents with specific concerns about their child’s behaviour who require active skills training; parents of children with severe behavioural problems; and parents of children with severe behavioural problems in combination with marital discord, parental depression or stress.

The TVW Telethon Institute of Child Health, based in Perth, is currently conducting an evaluation of the West Australian Triple P – Positive Parenting demonstration project designed for parents of preschool children and run by the Health Department of Western Australia. The study is the biggest of its kind in the world, involving 800 parents of toddlers who in January 1996 each received a free eight-week program.

At the 12-month follow-up, researchers found significant improvement in parenting style. Indicators of poor parenting such as inconsistent, verbose and overreactive responses decreased by up to 75 per cent in some cases; tantrums, disobedience and aggression among children halved. The progress of participants will be followed for three years (Fitzpatrick 1997).

*Universal home-visiting services*

Home-visiting programs are an important facet of a cohesive child abuse prevention strategy, ideally offering a universal primary preventative service with the flexibility to cater for the needs of ‘at risk’ or maltreating families (Vimpani et al. 1996). Such services have had some success carrying out an ‘early detection’ role and identifying families at risk before family dysfunction reaches a level requiring protective intervention (Olds et al. 1986a; Olds et al. 1986b; Olds et al. 1997). Typically involving infant welfare nurses or antenatal services, such programs are able to divert or refer families to the most appropriate support and can often alleviate the family situation without involving child protection services (National Research Council 1993; Tomison 1994; Vimpani et al. 1996). Most Australian States and Territories have some form of postnatal home-visiting program, albeit usually of limited duration.

*Personal safety programs*

A major primary prevention initiative is the education of school-aged children to teach them how to avoid, or seek assistance about, unwanted sexual or physical advances.

Currently the major school-based primary prevention initiatives are personal safety and Protective Behaviours programs (Tomison & McGurk 1996). Personal safety programs have the aim of educating school-age children to protect themselves from sexual abuse. The programs attempt to involve children's parents in order to raise community awareness of sexual abuse and to teach parenting skills related to protecting children and detecting signs of abuse (Plummer 1993). One common and consistent positive outcome of personal safety programs has been an improvement in parents' awareness and ability to protect their children (Plummer 1993; Briggs & Hawkins 1994).

## Secondary prevention

Secondary prevention programs target specific 'at risk' sections of the population; that is, those who have special needs or who need greater support, such as young parents, single parents, people with physical or intellectual disabilities, or Aboriginal and Torres Strait Islander people (Calvert 1993). Secondary prevention programs can be categorised as enhancing family functioning by providing various forms of family support, often through programs with a home-visiting component. Teaching parenting skills and increasing parents' knowledge of child development and behavioural expectations via parent education are a major facet of virtually all secondary prevention programs (Tomison 1997b).

*Family Support Team – Anglican Community Services, North Adelaide, South Australia*

The aim of the program is to provide a home-based, skills-focused intervention designed to empower eligible families to meet the needs of their children; to promote understanding of parenting, child development, behaviour management, budgeting and household organisation; to provide group-based opportunities that support the development of self-esteem, communication skills and social skills; and to provide linkages with appropriate community resources. The strategies used are listening, building trust, building on families' strengths, setting and reviewing achievable goals, modelling techniques and skills, facilitating groups, linking families with community resources, and perseverance. The service philosophy is 'family support complementing intensive family preservation'.

### *Services for the 'at risk' clients*

In 1997 the National Child Protection Clearing House undertook an audit of primary and secondary child abuse prevention activity in New South Wales for the NSW Child Protection Council (Tomison 1997b). In an assessment of 281 family support programs, 242 were identified as, in theory, providing services to 'at risk' families. However, the reality was that most of these agencies accepted both 'at risk' and maltreating clients.<sup>2</sup> In most cases the majority of clients appeared to come from the tertiary sector, often referred by statutory child protection services.

This trend for family support services to accept clients from the tertiary sector resulted in a scarcity of resources being available for secondary prevention initiatives, such as early detection or preventative services for voluntary (non-

statutory) clients, and/or those 'at risk' families who actively seek help prior to the development of abusive or neglectful concerns (Tomison 1996b; Tomison & McGurk 1996). Lack of resources in the child welfare system appeared to have led to an erosion in secondary prevention, with resources moved to cope with the demand for services by tertiary clients.

## Tertiary Prevention

Tertiary prevention incorporates initiatives that are aimed at preventing the recurrence of abuse or neglect in those families where children have already been maltreated. In Australia, the responsibility for tertiary prevention remains with the various States and Territories (Calvert 1993). Prevention strategies generally consist of in-depth parent education and training as an integral component of a program of family support, tailored to the needs of the child and family.

As mentioned above, programs theoretically designed for 'at risk' families have generally been overwhelmed as the child welfare and child protection systems attempt to deal with the demands for service of tertiary clients (Tomison 1995b; Tomison 1997b). This trend is exacerbated by tertiary clients' frequent need for more intensive, longer term work, which further drains limited resources.

## PROGRAM DIVERSITY

Garbarino, Guttman and Seeley contend that '[although] packaged programmes may be an efficient, effective way to provide parents with skills and knowledge that hitherto have been lacking, such programmes are not appropriate for all parents. Practitioners must modify and restructure these programmes, or even develop their own programmes to meet the special needs of the parents and families that they are helping' (1986:135).

Powell (1988) noted a general trend towards matching program content and methods to the needs and characteristics of parents while taking account of the influences of the local community within which the family resides. He stated that '[increasingly] programs aimed at low-income and high risk populations attempt to tailor the services and methods to the perceived and expressed needs of participants' (Powell 1988:6).

While it has become widely recognised that family support programs, and parent education programs in particular, need to be matched to local contexts and family needs, professionals have been hampered in putting this approach into practice (Powell 1988) by the current dearth of valid evaluation studies in the field of parenting programs (Tomison 1997a; James 1994; Chalk & King 1998). As a consequence, there is a limited knowledge base from which to determine the 'goodness of fit' between parental characteristics and program design (Powell 1988). Powell argues that, to date, discussions of program responsiveness to local communities have been 'vague or lacking in the identification of factors at the community level that impinge on program design and implementation' (1988:10).



## Diversity in Australia

The need for a diversity of parent education interventions and programs has been acknowledged in Australia (for example, Blackmore & Jewell 1993), where a variety of new initiatives and adaptations of international programs are currently operating across the country (Vimpani et al. 1996; Tomison 1997b). Some examples of new programs adapted or created for Australian communities are provided below.

### *Koori Parenting Program – Northern Rivers Health Service, New South Wales*

The Koori Parenting Program aims to provide information and assistance to aboriginal parents and communities regarding parenting issues and has the underlying goal of enhancing parenting (via positive parenting strategies) and breaking the cycles of violence.

### *Adolescent Pregnancy and Early Parenting Project, Nepean Division of General Practice, New South Wales*

The aim of this project is to encourage pregnant young women and young mothers to relate to a family doctor in the hope that a trusting relationship will be established and therefore continual health care and parenting advice will be provided. Local doctors who are members of the Division of General Practice attend antenatal clinics to get to know young women and their children.

### *The Starting Out Project, Burnside, New South Wales*

This is an education program aimed at secondary school students. Its purpose is to prevent abuse by educating young people about child development and the impact of abuse on children. The project assists young people to prepare for the demands of parenting before they become parents. It enables them to reflect on the way they were parented and to begin to think about how they want to parent. The Starting Out Project creates the possibility for breaking cycles of negative parenting and reinforcing more constructive and nurturing forms of parenting. Acknowledging the importance of adequate social support, the program includes networking activities where students roleplay being parents and seeking assistance. In this way the program attempts to familiarise students with available social supports in the hope that they will be more likely to use them in the future.

### *Bangalow Child Friendly Village, New South Wales*

The Bangalow Child Friendly Village program is a primary prevention community development initiative of the Bangalow Chamber of Commerce and the Northern Rivers (NSW) Area Health Service. The aims of the Child Friendly Village are to raise awareness of children's needs in decisions affecting the physical environment, in conjunction with attempts to enhance children's social and emotional environment.

A major facet of the village concept is the Bangalow Parenting Support Project, an integrated community program funded by the NSW Child Protection Council and based on networking, sustainability and community participation. The project is a primary prevention strategy designed to raise community awareness of parenting as a difficult but important job, and the need to support parents in raising their children. The community awareness facet of the program is run in conjunction with parenting skills programs which adopt a 'positive parenting' approach to parent education.

## A PARENT EDUCATION FRAMEWORK

In the previous sections the variety of parent education initiatives across levels of prevention have been outlined. Altepeter and Walker (1992) argue that, conceptually, the existing parent education literature provides a basis from which a comprehensive 'whole of community' prevention program can be developed. They outline a prevention strategy based on parent education in all its forms, which goes some of the way to establishing a model that addresses prevention across ecological levels (that is, at the individual, family, community and societal levels) (Belsky 1980) and across prevention types.

At the primary prevention level, the strategy incorporates short-term parenting courses for all parents across socioeconomic levels. The intention is to equip parents with broad-based skills which they can use as a base for effective parenting and adapt for individual parenting situations. Additional aims of the programs would be to strengthen parental coping skills and to foster the development of positive parent-child relationships. Such educational programs could be presented in a number of formats including media campaigns, and within a variety of local settings (for example, schools, churches and community health centres).

Programs targeting 'at risk' sections of the community (secondary prevention) would require more in-depth skills courses for known high-risk groups (for example, adolescent parents and parents lacking social support), for parents referred by existing health, welfare or family support agencies, or for parents who considered themselves as 'at risk' of maltreating their child.

Parenting courses would have the primary aim of preventing child maltreatment, which would be achieved via the enhancement of parental competencies, and child management skills in particular. As for the primary prevention programs, the aim would be to strengthen parental coping skills and to foster the development of positive parent-child relationships. In addition, secondary prevention parenting programs would incorporate the assessment and management of the unique concerns and needs (skills deficits) of the participants in order to reduce further the likelihood of maltreatment occurring.

Parent education at the tertiary level, where the aim is to prevent the occurrence of maltreatment, would require the adoption of an approach similar to that proposed for 'at risk' parents. Like secondary prevention programs, tertiary parent education interventions would be structured around an individualised, competency-based parent-training program. Such programs would, however, involve a more detailed assessment process, be very specific and be of longer duration. Both groupwork and individual sessions would be utilised such that the resultant program was conducted in a cost-effective manner (Altepeter & Walker 1992).

How would such a model address the various influences on parenting as posited by a social interactionist model like Belsky's (1980) ecological model?

First, at the ontogenetic or individual level, behavioural training is likely to ameliorate any direct influences of

parental history, such as being exposed to abusive or aggressive parenting styles, or a lack of practice at caring for children. Parent training provides new techniques and methods of managing child behaviour and resolving conflict in an effective, non-violent manner. Second, within the family (microsystemic level), parent-child interactions, the ability to tolerate environmental stress and other family conflict may all increase the likelihood of inappropriate parenting. Parent training addresses such issues – in broad terms at the primary prevention level and with greater specificity at the secondary and tertiary levels.

Third, at the exosystemic level (community level), external factors may interact with individual and family-based factors to create situations of risk. Principal among these are social isolation and financial hardship or difficulties, often caused by unemployment. A prevention strategy based purely on parent education would only be able to affect these factors indirectly, via the minimisation of inappropriate parenting practices (that is, to attempt to ensure that the stresses experienced by the parents do not result in poor or abusive parenting). However, it should be noted that some parenting programs, such as the US project '12-Ways', have attempted to incorporate a specific training component to address issues such as unemployment via job training (Lutzker, Wesch & Rice 1984).

Finally, at the societal (or macrosystemic) level, society's attitudes toward children, violence, physical punishment and child-rearing practices interact with individual, family and community factors to affect the potential for inappropriate parenting. As Altepeter and Walker note, the effect of direct parent-training programs on such societal attitudes is unknown and would be difficult to assess. However, a 'whole of community' media campaign promoting positive parenting messages may have an effect on local policies in schools or increase the rate of child maltreatment reports to statutory child protection services. On the assumption that such a comprehensive prevention strategy would be operating with limited resources, Altepeter and Walker advocate a focus on secondary prevention and the development of parent education courses for 'at risk' families.

## EVALUATIONS

Parent education strategies are currently a very popular form of child abuse prevention. It would, therefore, be expected that a body of research has been collected which clearly identifies the effectiveness of parent education programs and has informed the development of parent education programs. Unfortunately, this has not been the case.

First, it should be acknowledged that relatively little is known in general about the effectiveness of current child abuse prevention initiatives, mainly because of a failure to conduct careful program evaluations (Harrington & Dubowitz 1993; Melton & Flood 1994; Chalk & King 1998). This failure is exacerbated by the relatively low priority given to prevention programs by governments and other institutions, and the common tendency of funding only short-term demonstration or pilot projects (Melton & Flood 1994).

MacDonald and Roberts (1995), in their review of child abuse prevention programs in the United Kingdom, commented that the vast majority of interventions had not been evaluated prior to introduction, and to all intents and purposes had the status of uncontrolled experiments. They concluded that despite some promising evaluation research, there was still a need for better quality evaluations which incorporated more methodologically rigorous designs.

Fink and McCloskey (1990) reviewed 13 US program evaluations recommended by experts and published from 1978 to 1988. Using the 'true experiment' as their criterion, they reported that most of the studies were methodologically sound; that is, the studies had control groups or involved longitudinal research enabling an assessment of program effects on families over time.

However, they concluded that the evaluation studies were hampered by a lack of uniform definitions of child maltreatment and of what constituted an 'at risk' child or family, that the studies had not fully measured the impact of programs on the incidence of child abuse and neglect, and that they had failed to collect data on some of the indicators that were targeted for special attention in the prevention programs themselves. Thus, it was not possible to determine whether specific aspects of family functioning had improved as a result of participation in the project. Fink and McCloskey contended that without the construction of uniform definitions and accurate measures of child maltreatment it was not possible to build on other child abuse prevention evaluation research. These conclusions were recently supported by the US National Committee on the Assessment of Family Violence Interventions in their assessment of family violence prevention and treatment programs (Chalk & King 1998).

### Australian research

In a 1993 audit of the National Child Protection Clearing House Prevention Programs and Research databases, James (1994) concluded that, with a few exceptions, no systematic research had preceded the implementation of primary and secondary prevention programs in Australia. In many cases, overseas programs had been adapted for use without any investigation into the needs of the community for which the program was intended.

In spite of a general acceptance that methodologically 'rigorous' evaluations should be an essential part of all prevention programs, very few effective evaluations had been done in Australia.<sup>3</sup> In particular, James noted the distinct lack of attention paid to the evaluation of family support and parenting programs in Australia, stating that 'none have been effectively quantified in terms of actually measuring reduction in the incidence of child abuse and neglect' (1994:3), despite the quite extensive use of such programs across the nation.

However, subsequent audits undertaken by the National Child Protection Clearing House have indicated some progress towards the experimental evaluation of prevention programs in general. A second audit of the Clearing House Prevention Programs database indicated that service



providers had become more aware of the need to evaluate their programs effectively. A sizeable proportion of programs were reported to incorporate an 'extensive' evaluation (Tomison 1995b); that is, they had attempted to develop an elaborate, methodologically rigorous evaluation, such as the pre-test/post-test evaluation espoused by James (1994) and others.

More recently, an audit of New South Wales prevention initiatives carried out by the Clearing House (Tomison 1997b) indicated that approximately 34 per cent (85 of the 248 programs which supplied details of an evaluation) had applied a simple pre-test/post-test design to assess program effects on clients. However, while a number of agencies attempted to incorporate a degree of methodological rigour in the evaluation performed, the majority could not be classified as a 'rigorous' evaluation. A number of the larger non-government agencies, government services (such as hospitals, area health services or the Department of School Education), and university-supported projects (for example, 'Home-Start' and the University of Newcastle), had more success at developing methodologically rigorous evaluations. These agencies typically had the resources and staff expertise to undertake such an evaluation, or were able to contract it out to research units.

## Methodological issues

The Fink and McCloskey (1990) and James (1994) studies highlight some of the difficulties in attempting to apply a scientific approach to the appraisal of actual in situ prevention programs. As Vimpani et al. (1996:36) note, 'the stark realities of providing services to families conflict with the ideals of experimental realities'.

Apart from the issues identified by Fink and McCloskey (1990), evaluators have had to contend with an inability to control important familial and program-related variables, and the lack of a uniform standard for program success (Vimpani et al. 1996; Chalk & King 1998). As the US National Committee on the Assessment of Family Violence Interventions noted, '[variations] in the selection of relevant outcomes as well as differences in the service and evaluation designs make it difficult to compare the results of...interventions in the area of child maltreatment' (Chalk & King 1998:97).

Evaluations have been plagued by the lack of uniformity in the definition of child abuse and neglect, the tools used to measure the presence or absence of abusive or neglectful behaviour and the meaning of social support. Finally, variations in the components, duration and intensity of treatment and length of follow-up have confounded efforts to identify promising interventions (Chalk & King 1998).

## Parent education programs

Given the problems that have plagued child abuse and other violence prevention programs in general, it is not surprising that evaluations of parent education programs specifically are beset by a similar lack of methodologically rigorous evaluations. Thus, evidence of the effectiveness of parent education programs is somewhat limited.

Werkerle and Wolfe (1993) reviewed 24 studies which involved parents and young adults who were rated as being at various levels of risk of maltreating their children, and which utilised experimentally based evaluation methodologies. Overall, they concluded that programs of one to three years duration which provided a personalised approach (such as that provided by home-visiting programs) were clearly most successful in achieving targeted outcomes, particularly when dealing with high-risk individuals. A similar finding was reported by Roberts et al. (1991) in their review of home-visiting programs.

Brief home interventions (less than one month) appeared to be effective when parents were identified as having only general risk factors, such as first-time parenthood (Taylor & Beauchamp 1988). However, the failure of most studies to conduct a follow-up to determine the maintenance of these short-term benefits is a significant evaluation issue.

## Child competencies

Although child competencies were not the main focus of most of the studies that Werkerle and Wolfe reviewed, modest, positive results were reported in studies where the stimulation of children's development was specifically targeted via day care (Seitz, Rosenbaum & Apfel 1985) or home-visiting programs (Olds et al. 1986a; Olds et al. 1986b). However, few of these studies attempted to measure competence via a variety of child outcomes measured simultaneously, identifying a research 'gap' worthy of investigation (Werkerle & Wolfe 1993).

## US National Assessment

In the latest in a series of reports by the US National Research Council which examines social science research on violence and families in the United States, the US National Committee on the Assessment of Family Violence Interventions concluded that evaluation studies 'are usually small in scale, likely to be underpowered, and subject to a long list of rival interpretations' because of flawed or limited study designs and methods of assessment (Chalk & King 1998:91).

This committee identified 114 evaluation studies conducted in the period 1980-96 which were of sufficient methodological rigour (that is, an experimental or quasi-experimental investigation of program effectiveness which incorporated a comparison or control group) to enable inferences to be drawn about the effectiveness of specific interventions in the area of child maltreatment and other family violence (Chalk & King 1998). Overall, 78 of the 114 evaluations focused on child maltreatment interventions.

## Parental competence

Evidence from quasi-experimental studies indicated that parental competence was improved in seven of nine studies aimed at reducing child neglect (and in some cases physical abuse). However, the different outcome measures used focused on a variety of child-rearing practices and the personal care given by parents, hindering any attempt to identify trends in effectiveness. A study by Whiteman, Fanshel and Grundy (1987) evaluated an intervention designed to change parental perceptions and expectations, to teach

relaxation procedures as a means of ameliorating stress effects and to train parents in problem-solving skills. While all three components improved parents' scores on affection, discipline and empathy indexes, the greatest changes were observed with a composite intervention combining all three components. A further three studies which did not meet the selection criteria of the US National Committee on the Assessment of Family Violence Interventions indicated that parent support groups offering social skills and problem-solving training were more successful with neglectful parents than programs that offered general child development information (Daro 1988 and Gaudin et al. 1991, 1993, all cited in Chalk & King 1998).

#### *Parental mental health*

Six studies were reported to be able to produce short-term beneficial changes to the mental health of parents (usually mothers), including reductions in depression, enhanced self-esteem and a reduction of the negative effects of stress. However, only one conducted a follow-up study (Resnick 1985), which found that treatment gains had not been maintained after one year. Thus a hypothesised association between the enhancement of parental competence via a short-term intervention for long-term prevention of maltreatment currently lacks empirical support.

#### *Home-visiting programs*

Home-visiting services have been found to be very effective in detecting and identifying maltreating families and/or alleviating concerns once the cases are 'known' (Olds et al. 1986a; Olds et al. 1986b; Nelson, Saunders & Landsman 1993; Olds et al. 1997; Chalk & King 1998). Home-visiting services, whether they be similar to the Home Visitor service operating in the United Kingdom child protection system, to infant welfare nurses, or to family aides or volunteer family support personnel, are well placed to monitor the family over time and to influence parenting at critical transitions in family life (Chalk & King 1998). Where resources allow, home-visiting services are also able to support and educate parents in situ, and are much more likely to detect problematic changes in family functioning (Drotar 1992; Tomison 1994).

Family support services carrying out an 'early detection' role have also had some success in identifying families at risk before family dysfunction reaches a level requiring protective intervention (Olds et al. 1986a; Olds et al. 1986b; Olds et al. 1988; Olds, Henderson & Kitzman 1994; Olds et al. 1997). Such services are able to divert or refer families to the most appropriate support and can often alleviate the family situation without the necessity of involving child protection services (National Research Council 1993; Tomison 1994).

#### *Prenatal/Early Infancy Project*

The most scientifically rigorous program evaluation of a comprehensive home-visiting program, and arguably the most rigorous evaluation of a child abuse prevention program, is the Prenatal/Early Infancy Project developed by David Olds and colleagues (Olds et al. 1986a; Olds et al. 1986b; Olds et al. 1997). Professionally trained nurses were used as home visitors for a sample of 400 Caucasian expectant

mothers and their families in Elmira, a rural area of New York State. Elmira County was part of an area rated in 1980 as the worst in the United States in terms of economic conditions, and it had the highest rates of reported and substantiated child maltreatment in New York State from the early 1970s until the mid-1980s.

Participants were randomly assigned to one of four conditions: a control group that did not receive services; a minimal intervention group that received transportation to medical appointments; a group that received extensive prenatal home visiting and transportation; and a group that received extensive prenatal and postnatal home visiting and transportation. The nurses provided parent education and attempted to enhance parents' linkages to both formal and informal social supports (Olds et al. 1986a). The project evaluated a series of prenatal, birth and postnatal outcome variables, such as length of gestation, birth weight, quality of maternal-child interactions, disciplinary behaviours, child maltreatment reports and postnatal emergency room visits.

The major finding was that the home-visiting nurses significantly reduced the number of subsequent child maltreatment reports in comparison with the control group. The finding was particularly salient for families judged to be at high risk for child maltreatment. However, the service was also found to affect prenatal health behaviours significantly in terms of factors such as improved maternal diet, less smoking and greater social support. In addition, there were increases in the length of gestation and infant birth weight, including a 75 per cent reduction in preterm deliveries (Olds et al. 1988).

However, four years after completion of the intervention no significant differences existed between control and treatment groups in terms of behavioural or developmental outcomes or rates of child maltreatment (Olds, Henderson & Kitzman 1994). This was attributed to a selection bias in the original sample – nurses and other professionals who continued to have contact with mothers in the treatment groups might have been more sensitive to, and more likely to report, signs of child maltreatment. In contrast, Olds et al. (1997) reported on a 15-year follow-up study which indicated that prenatal and early childhood home visitation produced positive results. There was a reduction in subsequent pregnancies, the use of welfare, child maltreatment rates and criminal behaviour on the part of low-income, unmarried mothers.

The Prenatal/Early Infancy Project is unique in terms of the methodological rigour with which it has been conducted and the length of follow-up which has been undertaken. It has provided valuable empirical data which supports the provision of dedicated home-visiting services. In Australia, as a consequence of the economic recession of the late 1980s, the approach of many governments to child protection and child welfare was the abolition or cutting back of many of the services that had been conducting home visits, offering in place respite care or other forms of family support (Goddard & Carew 1993).

The recent Australia-wide trend of redressing the balance between child protection and the role of family support

(see Tomison 1996c), in conjunction with a greater recognition of the benefits of home-visiting programs (for example, Vimpani et al. 1996), has to some extent led to a resurgence of interest in the development of home-visiting programs, such as the Federal Government's investment in the Good Beginnings project.

#### *Good Beginnings: A New Pilot Home Visiting Project*

The Good Beginnings project aims to provide emotional and practical assistance to new parents through a volunteer home visiting program and informal discussion groups; promote positive parenting by building parents' self-esteem and their ability to access health, education and welfare agencies; provide information about child development, health care, nutrition, home and general safety; reduce the level of dependence on professionals by encouraging the effective and appropriate use of services and resources; and promote effective relationships with local general practitioners, health services and other key stakeholders.

Overall, home-visiting programs are clearly an important facet of a cohesive child abuse prevention strategy, ideally offering a universal, primary preventative service with the flexibility to cater for the needs of 'at risk' or maltreating families (Vimpani et al. 1996)

#### *Social support*

The absence of social support and a lack of involvement in social networks has been identified as an important risk factor for abusive and, particularly, neglectful families (for example, Nelson, Saunders & Landsman 1993; Drotar 1992; Tomison 1995a; Chalk & King 1998). Among other things, adequate social support, via the professional system or informal social networks, can provide parents and families with respite care, advice on parenting practices, skills acquisition, information and emotional support. The US National Committee on the Assessment of Family Violence Interventions identified six evaluations which investigated whether interventions were able to reduce social isolation, with success assessed via social network assessments. Overall, however, findings from the evaluations proved to be inconclusive.

In a few studies, attempts had been made to determine the efficacy of using 'natural helpers' or volunteer laypeople to support formal interventions. The volunteers had connections to the values and norms of the community or social environment where participant families were residing (Thompson 1995). Despite a number of researchers and practitioners advocating for volunteers in parenting programs, particularly those with a home-visiting role (for example, Thompson 1995), the committee concluded that the role of volunteer supports was currently not well understood (Chalk & King 1998).

#### *In summary*

Overall, the committee concluded that it was unrealistic to expect a short-term parent skills program in isolation to create lasting change (Chalk & King 1998). According to Chalk & King, 'focusing as they do on single incidents and short periods of support, the interventions in this area may be inadequate to deal with problems that are pervasive, multiple, and chronic' (1998:102).

The committee noted that it is currently unclear whether this is due to a lack of resources, the limited duration of studies which prevents the collection of a sufficiently large sample for analysis, or the lack of pre-evaluation research that describes service operation and the nature of the preventative intervention, thus providing a foundation for detailed evaluation.

As a consequence there is a dearth of evidence on 'what works, for whom, and under what conditions. Furthermore, program development and service innovation have exceeded the capacity of the service system to conduct meaningful evaluation and research studies on existing programs, interventions, and strategies to integrate such research into service delivery efforts' (Chalk & King 1998:91).

In order to rectify this, the committee identified four areas that merit further attention:

- describing what is known about services that are currently operating in the community;
- documenting the theory of change that guides such interventions;
- describing the stages of implementation of each individual program;
- describing programs' client referral, screening, and baseline assessment processes.

Evaluation would be further enhanced by paying greater attention to agency referral and screening processes, to staff workloads, and to the information needs of staff. The committee also advocated the development of creative partnerships between researchers, workers and program developers as a means of developing better program evaluations which can inform policy and practice. The National Child Protection Clearing House is currently investigating methods of implementing such an approach with Australian service providers.

#### **Evidence-based practice**

Given the limitations of current child abuse prevention program evaluations, evidence-based practice may offer a means of establishing a reasonable body of research upon which to base a prevention strategy (MacDonald & Roberts 1995; Clark 1997). Although program evaluations have traditionally been based on the 'scientist-practitioner' model, with data collected in 'true experiments' (Fink & McCloskey 1990), more recent literature has made mention of a number of other tools that can be employed to inform practice (MacDonald & Roberts 1995; Clark 1997).

Under an evidenced-based approach, the object is to identify all systematic trials, published or not, including those studies that produced negative effects or a null result. Information is also generated from routine practice, making the best use of qualitative data and finding 'methods of synthesizing evidence from the widest range of sources available' (Clark 1997:2). Deficits in methodological rigour are therefore compensated for, in part, by the richness and quantity of the data gathered.



## Universal outcome criteria

Developing effective outcome measurement is crucial to developing rigorous program evaluations as proposed by James (1994) and Fink and McCloskey (1990). Outcome measurement involves recording changes in individuals, families or communities targeted for an intervention, and collecting data in a way that makes it possible to determine whether the program is achieving its objectives (Clark 1997). This requires the development of a clear definition of program 'success' on the basis of an assessment of both program-specific and more broadly based social indicators (Kaufman & Zigler 1992; Clark 1997).

As an alternative to, or in conjunction with, evidence-based practice, prevention program evaluations would be enhanced further by the development of a universal set of outcome indicators to be routinely applied by all child and family services in order to enhance program evaluations. This would enable comparisons of similar types of programs to be made (James 1994).

In addition, if a program was operating in a number of individual agencies, ensuring uniform data collection methods across sites would give the potential for aggregating the data, providing a greater quantity of data than could be produced at one site and thus strengthening the power of the evaluation to provide useful results.

## SPECIAL POPULATIONS

Any discussion of parent education requires the special consideration of two particular groups: fathers, and the next generation of parents – today's children and young people.

### The role of fathers

The majority of studies investigating families, and parenting in general, have focused predominantly on mothers and children as sources of data (Warren 1983b; McBride & Darragh 1995). Similarly, much of the research on the relationship of parental factors and child maltreatment has focused on mothers, mainly those from low socioeconomic backgrounds (Ammerman 1989, Fantuzzo & Twentyman 1986 and Wolfe 1987, all cited in Ammerman & Hersen 1990; Holden, Willis & Cocoran 1992; National Research Council 1993), thus limiting understanding of the role of other parental characteristics in maltreatment. There has been a relative lack of emphasis on the role of fathers or other family members, except in the case of sexual abuse (Tomison 1996a).

This can be attributed in part to the historical role men in western societies have played in child-rearing, with the majority not being active participants despite the potential benefits for children and families (McBride & Darragh 1995). Prior to the late 1970s it was assumed in most studies of parent-child relationships that mothers were the dominant influence on children's development, with fathers playing a secondary role (Zaslow, Rabinovich & Suwalsky 1991, as cited in McBride & Darragh 1995).

Yet over 30 years ago evidence was produced which indicated that fathers played an important role in children and

young people's socialisation (Warren 1983b). In the last two decades in particular, there has been an increased emphasis on the role of the father in the prenatal/perinatal period of development (May & Perrin 1985), although the role fathers fulfil during this time is not entirely understood (Holden, Willis & Cocoran 1992). More recently, the role of fathers has begun to change, with society encouraging men to adopt a more active role in child-rearing (Harris & Morgan 1991).

One European study reported that more than 86 per cent of men and 87 per cent of women believed that fathers should be involved in child-rearing from the earliest age (Eurobarometer 1993, as cited in Speak, Cameron & Gilroy 1997). The British Social Attitudes Survey (1992, as cited in Speak, Cameron & Gilroy 1997) indicated that 68 per cent of women and 65 per cent of men aged between 18 and 34 years rejected the traditional 'man as breadwinner/woman as home-maker' roles. Concomitantly, both researchers and practitioners have begun to acknowledge the influence of fathers on the development of young children, such as enhanced cognitive and psychomotor development, and social responsiveness and resiliency during the school years (McBride & Darragh 1995; Smith & Pugh 1996).

The changes to the role of fathers have been linked with social demographic changes and, in particular, the changes in women's lives (including the restructured labour market and the increasing numbers of young children who have mothers working outside the home), changes in family formation, and debates about equal opportunities for women (Speak, Cameron & Gilroy 1997). Such trends have put pressure on fathers to participate in the care of their children regardless of their personal preference (Presser 1988) or level of child-rearing skills (Levant 1988).

In spite of these pressures, there is some evidence of a gap between societal expectations for paternal involvement and the actual involvement of fathers in child-rearing, with fathers still reported to participate minimally in comparison with mothers (Edgar 1991; Reiger 1991; McBride & Mills 1993). Overall, with paternal participation rates remaining low and with some fathers being unprepared to meet the changing expectations of their parenting role, the challenge for parent education is to develop programs designed specifically for fathers as a means of increasing their participation in child-rearing.

Such programs need to equip fathers with the parenting skills they need, provide them with alternative role models for fatherhood and offer opportunities for peer support, which is often not available for fathers (Levant 1988; McBride & McBride 1993). The programs should also offer men insight into the positive influences they can have on their children's development and the benefits for themselves of spending time caring for, and rearing, their children (McBride & Darragh 1995).

Although methodologically rigorous evaluations are rare, the research that is currently available indicates that such programs can assist fathers to take on an active parenting role (Devlin et al 1992; McBride & McBride 1993), improve communication skills (Levant & Doyle 1983), decrease

levels of parental stress resulting from the paternal role (McBride 1991), and improve family functioning (Cowan 1988, as cited in McBride & Darragh 1995). Parke et al. (1980, as cited in Holden, Willis & Cocoran 1992) produced a videotape of fathers feeding, changing and playing with their infant children as a means of enhancing fathers' skills. The results suggested that fathers who viewed the tapes were more knowledgeable and affectionate and displayed increased caregiving behaviours.

In Australia, a number of parenting programs for fathers have been produced. One of the most important of these has been the *Fathering the Future* project, which developed out of the Australian Men's Project, formed in 1996 with the support of the National Association for the Prevention of Child Abuse and Neglect (NAPCAN). The Australian Men's Project has the role of acting as a catalyst for the reaffirmation of the role of fathers in society. The objective is to remind men of the needs of children and the importance of a father's role in their positive development. As part of *Fathering the Future*, a national media campaign was developed around the theme 'Being a father is the most important job you'll ever have'.

The 'Men's Role in Parenting' project, funded by the Commonwealth Department of Family and Community Services and led by Professor Graeme Russell from Macquarie University, is currently investigating the role of Australian fathers in parenting and identifying the key principles that underlie effective parenting programs for fathers. The project involves a national survey of the diversity and level of involvement of men in parenting and includes an assessment of what men see as their current needs as parents; children's perceptions of their fathers; and the key elements of successful men's parenting programs. Findings from the project are expected to be available early in 1999.

No discussion of fathering is complete without acknowledging the impact of changing societal expectations for fathering on mothers. The reconceptualisation of the fathering role is likely to alter the respective parenting roles in families and to affect the household division of labour. Fathers are more likely to become involved in child-rearing if actively encouraged by mothers, while the fathering role may be restricted if the mother is reluctant to let her partner take on more responsibility (McBride & Darragh 1995).

It has been suggested that parent educators should therefore address the concerns of both mothers and fathers when developing parenting programs for men. Both men and women may be more likely to recognise the unique contributions fathers can make if parent education identifies the benefits for all members of the family that can result from changing the role of fathers in child-rearing and assist families to come to terms with the changes that may result from fathers taking greater responsibility for child-rearing (McBride & Darragh 1995).

### Educating the next generation of parents

There has been a growing perception in the 1990s that education should not be limited to purely academic areas (Cohn 1990, as cited in Oates 1990; Crime Prevention Committee 1995), but should be strongly involved in preparing young people to function in society. A primary prevention

strategy which has been adopted across Australia is the development of life skills and healthy relationships courses which promote appropriate interpersonal relationships and behaviour (Tomison 1997b). Such courses represent an attempt to develop in children and young people social competence, problem-solving skills and self-esteem (Tomison 1997b). Many of these courses incorporate components where young people are taught parenting and child-rearing skills (Tomison 1997b).

The provision of explicit training on non-violent conflict resolution, problem-solving and child-rearing techniques has two benefits: a reduction in corporal punishment and abuse (Fry 1993), and the disruption of the intergenerational cycle of violence by enabling children and young people to acquire problem-solving and conflict resolution techniques not involving violence (Fry 1993; Cashmore & de Haas 1995).

## ROLE OF PARENT EDUCATION

Altepeter and Walker's (1992) parent education 'framework' for prevention has been described above. While it can be argued that parenting courses may have great impact when targeted at 'at risk' families, the conclusion one is left with when assessing Altepeter and Walker's model is that parent education in isolation is not able to address effectively entrenched patterns of inappropriate parenting or child maltreatment and the family stresses typically affecting such families. For example, in a discussion of non-organic failure to thrive, Drotar notes that '[parent education] approaches are highly individualized and may require a highly structured treatment environment' (Drotar 1992:134).

Some cases of non-organic failure to thrive may respond favourably to parent education targeted at the mother-child relationship (for example, in cases involving a lack of parental nurturing); in other cases the problem may be one of a disturbed parent-child relationship, which may reflect broader family problems (for example, spousal conflict reducing a mother's ability to parent her child by depleting her energy levels). In such cases, focusing any intervention on the mother-child relationship without attending to the broader family issues may not be sufficient to maintain any long-term gains. Family problems may actually reduce a mother's capacity to respond to programs designed to improve her relationship with her child.

Support for the argument that lasting positive change is only achievable for 'at risk' or maltreating families if other powerful environmental influences that impact on parents are taken into account is provided by efforts to provide stand-alone parent education programs to low-income families in the United States in the 1960s and early 1970s (Powell 1997). In a review of the literature on parent-focused early intervention programs, Chilman (1973, as cited in Powell 1997) concluded that parent education programs for low-income families were unlikely to be successful at attracting or keeping the interest and attendance of parents, particularly fathers, regardless of the quality of the program. The social problems the families faced, such as financial difficulties and poor housing, appeared to overwhelm any potential for

success. Similarly, in the late 1980s Schorr and Schorr concluded that parent education was often 'quite irrelevant to socially isolated and otherwise seriously disadvantaged parents' (1988:263).

Child maltreatment is a complex phenomenon commonly associated with the occurrence of other individual, family and societal problems (for example, mental illness, substance abuse, domestic violence, unemployment, or lack of social support) (Melton & Flood 1994). A holistic approach must, therefore, be adopted to address what are often multi-problem, disadvantaged, dysfunctional families (Belsky 1980; Cohn 1982; Wolfe 1985; Kaufman & Zigler 1992; Melton & Flood 1994; Tomison 1997a). Consequently, it is concluded that parent education is best suited to addressing inadequate parenting or preventing child maltreatment as a core component of a holistic, 'whole of community', ecological prevention framework which is able to address child abuse prevention.

### Parent Education: Cornerstone of Prevention

The United States Advisory Board on Child Abuse and Neglect concluded that a new strategy is required to prevent child abuse and neglect – one that is 'comprehensive, child-centered, family-focused and neighbourhood-based' (1993:16, as cited in Melton & Flood 1994); one that takes 'children seriously as individuals' (1993:17, as cited in Melton & Flood 1994).

Under such an approach, effective child abuse prevention has a number of components, including:

- the coordination and integration of the roles of child protection, child and family welfare, law, health, mental health and education sectors;
- the development of a partnership between professionals and the local community based on a 'whole of community' approach that child maltreatment is everybody's problem;
- recognition of the role of neighbours (both geographical and psychological) in helping one another as the foundation for successful child abuse prevention (Melton & Flood 1994:25);
- the adoption of client-empowering philosophies that encourage families to seek assistance prior to the development of serious family dysfunction;
- the development of a 'strengths-based' approach to child and family welfare as a more fruitful means of addressing issues and achieving positive change; and
- addressing the underlying social forces that hinder effective prevention (Tomison 1997a).

What then, is the role of parent education within such a framework? The variety of parent education programs outlined above and encapsulated by Altepeter and Walker's (1992) framework would form a significant component of the proposed holistic approach. The broad role of parent education within specific elements of the approach is discussed below.

### 'Whole of community' approach

A whole of community approach involves the development of a partnership between professionals and the local community based on the tenet that child maltreatment is everybody's problem. While individual government departments may not be able to remedy poverty, inadequate housing or other significant structural factors that impact negatively upon children, families and communities (McGurk 1997), departments can work with local communities to strengthen families by increasing family resiliency at the community and individual levels.

McGurk (1997) outlines a possible role for child protection departments: to act as a catalyst for the enhancement of the capacity of communities, focusing on the development and delivery of a truly coordinated interdepartmental, cross-sectoral family and community support system. Parent education in all its forms is a necessary component of such an approach. The focus is on 'resolving or reducing the social problems of a neighborhood, locality, region or group, and on promoting living environments that foster the development of individual and collective potentials as well as the establishment of resource and power-sharing policies' (Dallaire et al. 1995:125).

### Social networks

In recent times there has been a greater recognition of the role of neighbours, both geographical and psychological, in helping one another as the foundation for successful child abuse prevention (Melton & Flood 1994; Vinson, Baldry & Hargreaves 1996). There is a substantial body of evidence demonstrating the extent to which families who become clients of child protection or child welfare services are socially isolated (for example, Tomison 1996c; Reppucci, Britner & Woolard 1997; Chalk & King 1998). Similarly, research evidence reveals significant improvements in family functioning when their integration into local community networks is facilitated (McGurk 1997). The prevention of child maltreatment may be enhanced by programs that attempt to simulate some of the 'helpful child-rearing functions attributed to naturally occurring networks' (Vinson, Baldry & Hargreaves 1996:540).

Facilitating access to social supports has been a strong role of parent education. Thus parent education would again provide a basis from which to develop social networking at the individual, neighbourhood and community levels.

### Enhancing access to services

Under the proposed framework, client-empowering philosophies are adopted in order to encourage families to seek assistance prior to the development of serious family dysfunction. The 'child and family centre' is a relatively new development which has adopted this tenet. These are multi-service community centres that provide support to families on a number of dimensions; they are frequently referred to as 'one stop shops' (Tomison 1997a; Tomison 1997b). Available in parts of the United States, such centres have recently been developed in a variety of forms in Australia.

The centres aim to provide a local, non-stigmatising family support service that encourages families to seek assistance. While most child and family agencies support



'at risk' or maltreated children and their families, an objective of these centres is to promote child and family wellbeing rather than allow family problems to develop to the extent that secondary or tertiary prevention becomes the focus of centre activity. Thus the centres endeavour to offer practical support (for example, child care, self-help groups and legal advice) in addition to traditional family support, with agency staff available to assist clients in clarifying their wants and needs.

Services typically offered include mental health, child health and dental services; family support services (including parenting information and skills programs); women's services; financial aid; legal advice; and client advocacy. Drop-in centres, parenting and other self-help courses, social groups and other community activities are provided to enable those who are socially isolated to develop improved social networks.

#### *Inter-Agency School Community Centres Pilot Project*

One approach to developing 'child and family centres' which is currently receiving much praise is the Inter-Agency School Community Centres Pilot Project operating in New South Wales. In a cross-sectoral collaboration, the NSW Departments of School Education and Community Services and Health have worked together to fund a two-year pilot program to establish four interagency school community centres. Administered by the NSW Department of School Education and located at public schools, the program aims to develop and trial models of interagency coordination, and to support families with children of five years and under with a view to preventing disadvantage at school entry.

The project objectives are to encourage and support families in their parenting role; to identify needs, knowledge gaps and issues in the local community; to promote community involvement in the provision and coordination of services for children and families; and to promote the school as a community centre. Social Systems and Evaluation (1996) produced an interim evaluation report based on interviews with parents, community members, organisations involved in the local projects, school personnel and various management staff. It was concluded that there was a high level of community support for the continuation of the project, and a strong level of community involvement. Community representatives noted the positive impact of the local centres on the communities' perceptions of themselves: 'People have begun to feel good about their community and to take action to improve amenities.' (Social Systems & Evaluation 1996:2). The New South Wales Government recently announced additional funding for the project.

#### *Strengths-based approach*

The development of a 'strengths-based' approach to child and family welfare offers a more fruitful means of addressing issues and achieving positive change (Tomison 1997a). This modern concept of parent support has arisen partly in response to criticisms of the assumption that professionals and other people in power are best placed to determine parental needs and because of the deficits focus of many professional interventions. With regard to the latter, there has

previously been a practice orientation towards remedying weakness or limitations, rather than focusing on building family assets. This has been criticised for creating significant power imbalances between professionals and parents and, in some cases, for fostering parent dependence (Powell 1997).

A 'strengths-based' approach to practice is based on the development of an effective collaborative relationship with children and their families (De Jong & Miller 1995). The underlying tenet of this perspective is that all families have strengths and capabilities. If practitioners take the time to identify these qualities and build on them, and attempt to develop a true collaborative partnership between family members and themselves rather than focusing on the correction of skills deficits or weaknesses, families are more likely to respond favourably to interventions and thus the likelihood of making a positive impact on the family unit is considerably enhanced (Dunst, Trivette & Deal 1988). In the context of parent education, establishing rapport and forming a partnership with parents has been shown to improve program success and outcomes for parents and children (Polansky et al. 1981; Wahler & Dumas 1984, as cited in Kaufman & Zigler 1992).

#### *The 'culture of violence'*

Effective child abuse prevention strategies require consideration of the means to address the social forces underpinning child abuse, neglect and other family violence (Altepeter & Walker 1992; Tomison 1997a). Gil wrote that violence in families is an inevitable by-product of the 'selfish, competitive and inegalitarian values and of dehumanising, authoritarian, and exploitative social structures and dynamics which permeate many contemporary societies' (1979:1).

To replace the current culture of violence which pervades most western societies with a culture of non-violence and non-violent parenting practices, primary prevention initiatives, whether targeting violence as a whole or child abuse in particular, must involve the identification and eradication of the causes of violence, rather than the mere neutralisation of the symptoms (Harrington & Dubowitz 1993; Rayner 1994). One strategy advocated by many researchers (for example, Altepeter & Walker 1992, Fry 1993, Cashmore & de Haas 1995), is the promotion of attitudes and beliefs that oppose the use of physical force. The Scandinavian countries have already begun this process, having outlawed physical punishment by adults some years ago (Fry 1993; Cashmore & de Haas 1995). However, in Australia, as in most of the western world, attitudes and beliefs favouring physical chastisement are still pervasive (Cashmore & de Haas 1995).

Sweden provides a working example of this proposal. With the introduction of the 'Code of Parenthood' law in 1979, which banned corporal punishment and other humiliating treatment of children, the Swedish Government launched an education campaign targeting the whole population (Kahn 1990). Booklets describing the law, its background and its provisions were sent to all households and translated into various languages in order to access migrant populations. More detailed information packages

were also developed, including an educational package for use in schools. The initiative resulted in an increase in the community's awareness of effective alternatives to physical punishment for the education and disciplining of children (Kahn 1990).

In 1979 the Swedish Government passed further legislation covering the development of a voluntary national antenatal and postnatal parent education program. Designed to reach all expectant parents and parents of infants and children, it involved practical training in child health centres for mothers. The program, which remains in operation, involves up to 20 sessions on child care and parenting issues, ideally with half the sessions completed at the antenatal stage.

The existence of such a program indicates the rejection of the commonly held assumption that parenting is an innate skill. It represents a coordinated approach to changing community attitudes to physical punishment while providing effective alternative strategies for parents.

## CONCLUSION

'The education of children is one of the most important tasks for any society, for on the success or failure of such education ultimately depends the survival of that society' (Warren 1983a:34).

Although the education of children and young people is accorded great importance in western societies, until recently there has been relatively little interest in the education or standard of child-rearing provided by parents, in spite of the important role parents play as primary educators of the young (Warren 1983a). Warren concludes that 'as a society we ignore the contributions and the struggles of parents at our peril. It could be argued that education for child-rearing should be a first priority for any society' (1983a:34).

Most parents are able to raise their children in a manner acceptable to the community. However, it is also clear that most parents will at some time require assistance or support to raise their children. A proportion of parents will require more-detailed information, training and support in order to reach a standard of 'good enough' parenting and, in some cases, prevent the occurrence or recurrence of child maltreatment.

In the last decade, parent education has become a pervasive means of enhancing the knowledge and skills of parents to assist them to fulfil their child-rearing role. Parent education encapsulates a multitude of community education and parent-training initiatives which operate across the spectrum of prevention. Parent education programs appear able to provide families with skills and knowledge of parenting and child development and thus goes part of the way towards setting some basic standards of adequate parenting. Evidence suggests that initiatives are undergoing continual modification and adaptation to meet the changing needs of diverse communities.

The growth of parent education initiatives is associated with a change in the tenets underpinning the prevention of child maltreatment and interventions to protect children.

Although ensuring the safety of the child remains the focus of professional concern, it is now common for interventions to be targeted at the parent (typically the mother) rather than the child, under the assumption that modifying the parent's behaviour will protect the child (Chalk & King 1998).

There is, therefore, a need to ensure that a balance is maintained between child-focused and parent-focused issues so that child development issues are not overshadowed in attempts to deal with parent and family problems (Powell 1997). There is some research evidence which suggests that improvements in child outcomes cannot be achieved when relatively little attention is paid to child development issues (Travers, Nauta & Irwin 1982, as cited in Powell 1997).

Overall, as is the case in much of the child abuse prevention field, little empirical evidence has been collected to define adequately the effects of parent education on parents and children, or which specific strategies and programs are most effective (with the exception of the Prenatal Early Infancy Project developed by David Olds and his colleagues). In spite of a clear effort by service providers (and researchers) to improve the quality of their program evaluations, the nature and demands of in situ programs, like those of parent education and child abuse prevention programs in general, has meant that the task of developing rigorous experimental evaluations is a difficult one. While evaluations should continue to become more rigorous over time, some consideration should be given to the development of alternative forms of evidence, in conjunction with ongoing work to develop a uniform definition of child maltreatment, a set of uniform program outcomes and definitions for key concepts.

What is apparent from the research and practice literature is that the present popularity of parent education has led some to perceive parent education programs as a panacea for child maltreatment. However, it is naive to expect that parent education, and particularly parenting skills courses (even when tailored to the needs of individual 'at risk' and maltreating families) can overcome the various pressures and problems that may affect families. What is crucial is to harmonise different preventative strategies operating at varying levels in order to maximise the efficacy of any intervention (Schorr & Schorr 1988). It is by adopting a comprehensive approach to child abuse prevention and inappropriate parenting, such as the holistic approach described in this paper, that child maltreatment is most likely to be prevented. Parent education in all its forms should be a cornerstone of any prevention framework, providing parents and caregivers with information and training that can assist them to raise their children in an appropriate manner.

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### Notes

<sup>1</sup> The terms 'child maltreatment' and 'child abuse and neglect' will be used interchangeably throughout this paper. Unless otherwise stated, the term 'child abuse prevention' encompasses the prevention of all forms of child abuse and neglect.

<sup>2</sup> One exception was the Benevolent Society's Early Intervention program, which adhered to a strict policy of only accepting 'at risk' families in order to maintain program integrity.

<sup>3</sup> A 'rigorous' evaluation is one designed as a 'true experiment' (Fink & McCloskey 1990) involving pre- and post-test models, and/or matched control and experimental samples. The overall intention would also be to evaluate with large sample sizes over time, enhancing the potential for future replication.

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The National Child Protection Clearing House at the Australian Institute of Family Studies serves as an interchange point for information, research and initiatives in the child abuse prevention field. It collects and distributes information, and aims for a two-way involvement with the community concerned with child protection.

To participate in the work of the Clearing House –

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- Mullen, Paul E. & Fleming, Jillian (1998), *Long-term Effects of Child Sexual Abuse*.
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- Tomison, Adam M. (1996), *Child Maltreatment and Disability*.
- Tomison, Adam M. (1996), *The Intergenerational Transmission of Child Maltreatment*.
- Tomison, Adam M. (1995), *Update on Child Sexual Abuse*.
- Tomison, Adam M. (1995), *Spotlight on Child Neglect*.
- James, Marianne (1994), *Child Abuse Prevention: A Perspective on Parent Enhancement Programs from the United States*.
- James, Marianne (1994), *Domestic Violence as a Form of Child Abuse: Identification and Prevention*.
- James, Marianne (1994), *Child Abuse and Neglect: Incidence and Prevention*.

## Child Abuse Prevention Discussion Papers

- Tomison, Adam M. (1996), *Child Maltreatment and Family Structure*.
- Tomison, Adam M. (1996), *Child Maltreatment and Substance Abuse*.
- Tomison, Adam M. (1996), *Child Maltreatment and Mental Disorder*.

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